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OPTIONAL TRANSMITTAL FORM SEP 28 2006 (to be used for all correspondence after initial filing)	Application Number	
	Filing Date	
	First Named Inventor	
	Art Unit	
	Examiner Name	
Number of Pages in This Submission	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
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Remarks REPLACEMENT SHEET 1 Of 1 as noted in Notice of Allowability of 7-6-2006 Part B - Fee Transmittal and check in the about of \$1700.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MARSHALL & MELHORN, LLC		
Signature	<i>D. Edward Dolgorukov</i>		
Printed name	D. Edward Dolgorukov		
Date	<i>September 25, 2006</i>	Reg. No.	26,266

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Roberta A. Winzeler</i>		
Typed or printed name	Roberta A. Winzeler	Date	<i>9-25-06</i>

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